

Safe Ways to School Research Project  
Survey Forms

A-1

MAINE SAFE WAYS TO SCHOOL  
Westbrook School District Survey

Dear Parent or High School Student:

The Maine Department of Transportation is interested in what factors influence decisions to bicycle or walk (includes skating or using a scooter) to school. The Center for Research and Evaluation at the University of Maine in conjunction with Rizzo Associates and the Westbrook School District ask that you provide information about how your children/you (if you are a high school student) travel to school. Please take a few minutes to complete this survey - **one survey for each student attending Westbrook schools.**

1. The person completing this survey: ☐ Student's parent ☐ High school student ☐ Other (*relation*) \_\_\_\_\_
2. The school this student attends: ☐ Prides Comer ☐ Canal ☐ Junior High  
☐ Saccarappa ☐ Congin ☐ High School
3. This student is in grade: ☐ K ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐ 11 ☐ 12
4. The approximate distance **in miles** from the student's home to school:  
☐ 0 to 1/2 ☐ 1/2 to 1 ☐ 1 to 3 ☐ 3 to 5 ☐ More than 5
5. On average, how many times per week does this student use the following methods to travel to and from school?  
*Each column should add to a total of five days.*

	To School			From School		
	Fall	Winter	Spring	Fall	Winter	Spring
Walk						
Bicycle						
School Bus						
Car						
Carpool						
Other ( <i>list</i> )						

6. Indicate in the table below, whether or not you feel this student/you can reasonably walk or bicycle to school.

Student can reasonably	Fall		Winter		Spring	
Walk	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Bicycle	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No

7. Indicate the reasons this student does not walk or bicycle to school? (*check **all** that apply*)

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> a. Too far to walk               | <input type="checkbox"/> g. Unfriendly dogs      | <input type="checkbox"/> m. Teased by other students |
| <input type="checkbox"/> b. Sidewalks not adequate        | <input type="checkbox"/> h. Scary people         | <input type="checkbox"/> n. Child too young          |
| <input type="checkbox"/> c. Insufficient crossing guards  | <input type="checkbox"/> i. Traffic too heavy    | <input type="checkbox"/> o. Child has a disability   |
| <input type="checkbox"/> d. Drop off child on way to work | <input type="checkbox"/> j. Student feels unsafe | <input type="checkbox"/> p. Too far to bicycle       |
| <input type="checkbox"/> e. Streets unsafe for bicycles   | <input type="checkbox"/> k. Can sleep later      | <input type="checkbox"/> q. Cold weather             |
| <input type="checkbox"/> f. Student has too much to carry | <input type="checkbox"/> l. Tardiness            | <input type="checkbox"/> r. Too icy                  |
| <input type="checkbox"/> s. Other _____                   |  |  |

CONTINUE➡

8. Do you have concerns about traffic safety along the routes to school? ☐ Yes ☐ No

9. If yes, describe traffic safety problem areas and include specific streets or intersections that are of concern.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

10. In what ways do you think students benefit from walking or bicycling to school? (*check **all** that apply*)

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> a. Healthy exercise | <input type="checkbox"/> c. Fun               | <input type="checkbox"/> e. Independence and responsibility |
| <input type="checkbox"/> b. Stress reduction | <input type="checkbox"/> d. More outdoor time | <input type="checkbox"/> f. Other ( <i>list</i> ) _____     |

**High school students should go directly to #13 (skip #11 and #12).**

11. Do you allow this student to walk or bicycle to school? ☐ Yes ☐ No

12. If you responded "no" to #11, would you allow this student to walk or bicycle to school if: (*check **all** that apply*)

- |  |   |
|--|---|
| <input type="checkbox"/> a. Accompanied by other children          | <input type="checkbox"/> f. Roads were widened to include paved shoulders     |
| <input type="checkbox"/> b. Accompanied by other parents           | <input type="checkbox"/> g. Cars slowed down                                  |
| <input type="checkbox"/> c. There were crossing guards             | <input type="checkbox"/> h. Secure bicycle parking was available              |
| <input type="checkbox"/> d. There was safety training for children | <input type="checkbox"/> i. Bicycle/walking paths were separated from traffic |
| <input type="checkbox"/> e. Sidewalks were improved or constructed | <input type="checkbox"/> j. Other _____                                       |

13. What changes, if any, would encourage or allow this student to:

- a. Walk to school \_\_\_\_\_
- \_\_\_\_\_
- b. Bicycle to school \_\_\_\_\_
- \_\_\_\_\_
- c. Ride the school bus \_\_\_\_\_
- \_\_\_\_\_

14. Would you be interested in volunteering to help set up or maintain a walking or biking program? ☐ Yes ☐ No

If so, please provide your name and telephone number. \_\_\_\_\_

Please return this survey by **Friday, October 19, 2001** to the student's teacher or mail to:  
The University of Maine, Center for Research and Evaluation, College of Education and Human Development, 5766  
Shibles Hall, Orono, ME 04469.

Thank you!

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Safe Ways to School  
Classroom Survey

Dear Teacher,

*The Center for Research and Evaluation is working in collaboration with Rizzo Associates and the Maine Department of Transportation to identify and promote safe ways for Maine children to travel to and from school.*

*Below you will find a short survey to be completed with the help of your students. Please administer the survey on a "FAIR WEATHER" day. As always, we appreciate your time and support.*

School District: \_\_\_\_\_

School Name: \_\_\_\_\_

Grade Level: \_\_\_\_\_ Total Number of Students in Your Classroom Today: \_\_\_\_\_

Today's Date: \_\_\_\_\_ Today's Weather: \_\_\_\_\_

*Please read the following statements in **bold** to your students:*

Some researchers at The University of Maine and the Maine Department of Transportation want to know how you got to school today. I am going to read you some statements and then ask you to raise your hand for the one that applies to you. Please be sure to raise your hand only one time.

1. Raise your hand if you skated or 'scooter'ed to school today. # of hands raised: \_\_\_\_\_
2. Raise your hand if you rode your bike to school today. # of hands raised: \_\_\_\_\_
3. Raise your hand if you walked to school today. # of hands raised: \_\_\_\_\_
4. Raise your hand if you came to school on a school bus today. # of hands raised: \_\_\_\_\_
5. Raise your hand if you came to school in a car or motor vehicle today other than a school bus. # of hands raised: \_\_\_\_\_

→ The total number of hands raised for questions 1 through 5 should not exceed the total number of students in your classroom today.

Thank You!

Please return this survey to the District Safe Ways to School coordinator or mail it to:

The University of Maine  
Center for Research and Evaluation  
College of Education and Human Development  
5766 Shibles Hall  
Orono, Maine 04469